PTO/SB/05 (03-01)

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No.		X-9360				
First Inventor		Steiner				
Title	Improved	Bone-Tendon-Bone				
Ever	Express Mail Label No.					

(Only for new nonprovision	nal applications under 37 CFR 1.53(b)	Express	<u>s Mail Label No</u>					
APPLICA	TION ELEMENTS	ADD	RESS TO:	Assistant Cor Box Patent A		oner for Patents ion		
See MPEP chapter 600 cond	eming utility patent application conten	ts.		Washington,	DC 20	231		
1. X Fee Transmittal Fe (Submit an original and a Applicant claims s See 37 CFR 1.27. 3. X Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Regions - Reference to se or a computer p - Background of - Brief Summary	orm (e.g., PTO/SB/17) duplicate for fee processing) mall entity status. [Total Pages 28] It set forth below) of the invention e to Related Applications arding Fed sponsored R & D equence listing, a table, program listing appendix the Invention of the Invention of the Drawings (if filed) ption Disclosure	7.	Specification Sequence i. CD-RG ii. paper Statements vacCOMPANYI X Assignment P 37 CFR 3.73((when there is purple) English Trans Information D	D-R in duplicate pram (Appendiano Acid Sequence Seary) adable Form (ence Listing of DM or CD-R (appendiano Covers (covers to san assignee) lation Docume is closure	e, large x) ence S CRF) n: 2 copie y of ab CATIC heet &	e table or submission es); or eve copies ON PARTS document(s)) Power of Attorney		
v	[Olar ages	'	-	S)/PTO-1449	·	- Challons		
	uted (original or copy) prior application (37 CFR 1.63 (d))	1 6	13. Preliminary Amendment Return Receipt Postcard (MPEP 503)					
b. [14. [X] (Should be specifically itemized)					,			
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					nt(s)			
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR			Nonpublication Request under 35 U.S.C. 122					
	1.63(d)(2) and 1.33(b). 16. (b)(2)(B)(i). Applicant must attach form PTO/SB/35							
6. Application Data	Sheet. See 37 CFR 1.76	[or its equivale	ent. 				
O Application bata	Sheet. See 37 STK 1.75	17.	Other:					
	CATION, check appropriate box, and	supply the requ	uisite information b	elow and in a p	orelimi	nary amendment,		
or in an Application Data She	Divisional Continuation-in-part (C	ID)	of prior application No.:_	,				
Prior application information:	Examiner	",	Group Art Unit:					
	ONAL APPS only: The entire disclosure	of the prior app	•	an oath or dec	aration	is supplied under		
Box 5b, is considered a part of	f the disclosure of the accompanying cor	itinuation or div	visional application :	and is hereby in	согро			
I no incorporation can only be	relied upon when a portion has been ina			ad application (Jarts.			
19. CORRESPONDENCE ADDRESS								
Customer Number or Bar Co	ode Label (Insert Customer No. or Attac	فالجناه في سنان	or	X Correspon	ndence a	ddress below		
Name	John S. Hale c/c	Gippl	e & Hale					
	6665-A Old Domin							
Address								
City	McLean	State	VA	Zip (Code	22101		
Country		Telephone	703 448-			448-7780		
<u> </u>	1				T	1330 7700		
Name (Print/Type)	John B. Hale	Reg	istration No. (Atto	orneyl Agent)	25	209		
Signature	1 \ 2 Km / 1 Lel			Date	3/	/08/2002]		

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PTO/SB/17 (11-01)
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	1.	243	0.0
(4)	1,	243	

spond to a collection of information unless it displays a valid OMB control number.						
Complete if Known						
Application Number						
Filing Date	3/08/2002					
First Named Inventor	Steiner					
Examiner Name						
Group Art Unit						
Attorney Docket No.	X-9360					

METHO	DD OF PAYN	MENT (check all that apply)	FEE CALCULATION (continued)						
X Check	Credit card	Money Other None	3. A	3. ADDITIONAL FEES					
X Deposit Account:			Large	Entity	Sma	II Entit	<u>y</u>		
Deposit			Fee Cod	Fee e (\$)	Fee		Fee Description	Fee Paid	
Account Number	07-13	40	105	130	205	65	Surcharge - late filing fee or oath		
Deposit Account Name	Gippl	e & Hale	127	50	227	25	Surcharge - late provisional filing fee or cover sheet		
		zed to: (check all that apply)	139	130	139	130	Non-English specification		
	s) indicated belo		147	2,520	147	2,520	For filing a request for ex parte reexamination		
		during the pendency of this applicatio	n 112	920*	112	920°	Requesting publication of SIR prior to		
	•	ow, except for the filing fee					Examiner action		
to the above de	entified deposit a		113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
4 54010 51		LCULATION	115	110	215	55	Extension for reply within first month		
1. BASIC FI			116	400	216	200	Extension for reply within second month		
Fee Fee	Fee Fee	Fee Description	117	920	217	460	Extension for reply within third month		
Code (\$)	Code (\$)	Fee Paid	118	1,440	218	720	Extension for reply within fourth month		
101 740 106 330	201 370 206 165	Utility filing fee Design filing fee	128	1,960	228	980	Extension for reply within fifth month		
107 510	207 255	Plant filing fee	119	320	219	160	Notice of Appeal	ļ	
108 740	208 370	Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal		
114 160	214 80	Provisional filing fee	121	280	221	140	Request for oral hearing		
			138	1,510	138	1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 370.		140	110	240	55	Petition to revive - unavoidable			
2. EXTRA C	LAIM FEES	FOR UTILITY AND REISSUE	141	1,280	241	640	Petition to revive - unintentional		
	1	Ext <u>ra Claims below</u> Fee Paic	142	1,280	242	640	Utility issue fee (or reissue)		
Total Claims	75 -20**		143	460	243	230	Design issue fee		
Independent Claims	12 -3"	= 9 × 42 = 378	144	620	244	310	Plant issue fee		
Multiple Depen	dent	=	122	130	122	130	Petitions to the Commissioner		
			123	50	123	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Fee Fee	Small Entity Fee Fee	Fee Description	126	180	126	180	Submission of Information Disclosure Stmt	<u> </u>	
Code (\$) 103 18	Code (\$) 203 9	Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)		
102 84	202 42	Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))		
104 280	204 140	Multiple dependent claim, if not paid	149	740	249	370	For each additional invention to be		
109 84	209 42	** Reissue independent claims over original patent					examined (37 CFR § 1.129(b))		
110 18	210 9	** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)		
•		and over original patent	169	900	169	900	Request for expedited examination of a design application		
	SUB	TOTAL (2) (\$) 873.	Othe	r fee (s	pecify	ı)			
**or number	r previously paid,	, if greater; For Reissues, see above	'Rec	luced b	y Bas	ic Filing	Fee Paid SUBTOTAL (3)		

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	John S. Hale	Registration No. (Attorney/Agent)	25,209	Telephone	703 448-1770		
Signature	Aohn & Gale			Date	3/08/2002		

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